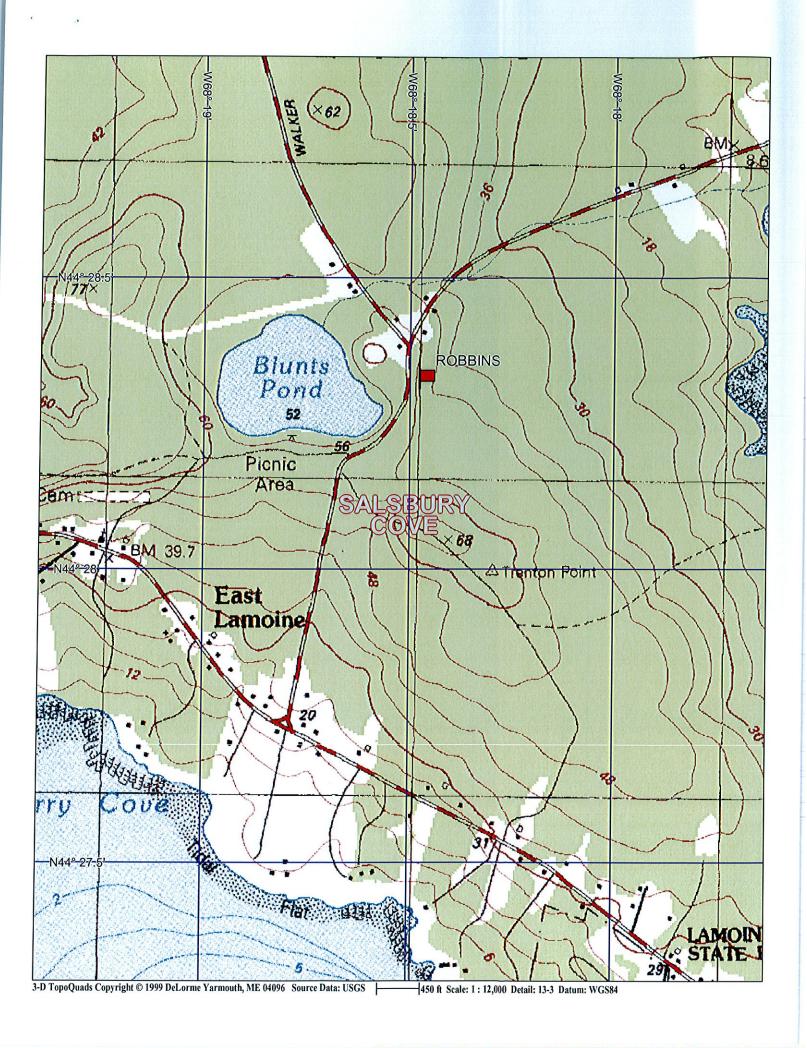
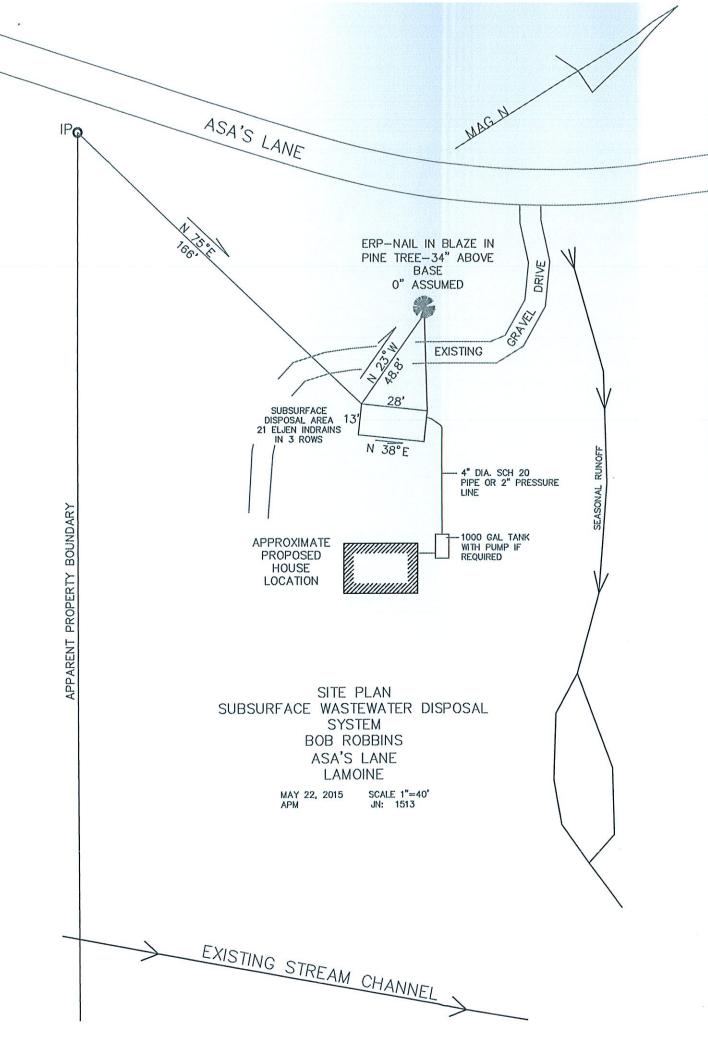
SUBSURFAC	E WASTE	WATER DISPOSAL SYSTE	EM APPLICATION	١	Maine Dept.Health & Human Services Div of Environmental Health , 11 SHS (207) 287-5672 Fax: (207) 287-4172	
The second secon	PROPERTY	LOCATION	>> CA	UTION: LPI AF	PROVAL RE	EQUIRED <<
City, Town, or Plantation	LAMOINE		Town/City LAM	ONE	Permit #	1762
Street or Road	ASA'S LANE		Date Permit Issued 5 130115 Fee: \$ 250			
Subdivision, Lot #			Logal Plumbing Inspector Signature			
	R/APPLICA	NT INFORMATION	Logal Plumbing Insp	ector Signature		□ Owner □ Town X State
Name (last, first, MI)		X:Owner □Applicant	The Subsurface Wastewa	ter Disnosal System sha	Il not be installed un	tila
ROBBINS, BOB		САРРІСАН	Permit is issued by the Local Plumbing Inspector. The Permit shall			
Mailing Address of Owner/Applicant	39 KERRY DR	VE ·	authorize the owner or installer to install the disposal system in accordance			
Destina Tal #	MARSTONS M	ILLS, MA 02648	with this application and the Maine Subsurface Wastewater Disposal Rules. Municipal Tax Map # Lot # Lot #			
Daytime Tel. #	508-280-3945					
OWNER OR APPLICANT STATEMENT I state and acknowledge that the information submitted is correct to the best of my knowledge and understand that any falsification is reason for the Department and/or Local Plumbing Inspector to deny a Permit.			CAUTION: INSPECTION REQUIRED I have inspected the installation authorized above and found it to be in compliance with the Subsurface Wastewater Disposal Rules Application. (1st) date approved			
Signat	ure of Owner or Ap	pplicant Date	Local	Plumbing Inspector Signa	ature	(2nd) date approved
		PER	MIT INFORMATION			
TYPE OF APPL	LICATION	THIS APPLICATION REQU	UIRES	DISPO	OSAL SYSTEM	COMPONENTS
X1. First Time Syste	m	X1. No Rule Variance		X□1. Complete Non-engineered System		
2. Replacement Sy	rstem	2. First Time System Variance		□2. Primitive System (graywater & alt. toilet) □3. Alternative Toilet, specify: □3. Toilet, specify: □3. Toilet, specify: □4. Toilet □5. Toilet □6.		
Type replaced:		Local Plumbing Inspector Appro State & Local Plumbing Inspect	oval or Approval	□4. Non-engineered Treatment Tank (only)		
Year installed:		3. Replacement System Variance		□5. Holding Tank, gallons □6. Non-engineered Disposal Field (only)		
3. Expanded Syste a. <25% Expansi b. >25% Expansi	m on on	Local Plumbing Inspector Approval State & Local Plumbing Inspector Approval		☐7. Separated Laundry System ☐8. Complete Engineered System (2000 gpd or more)		
 Experimental Sy 	stem	4. Minimum Lot Size Variance		☐9. Engineered Treatment Tank (only)		
5. Seasonal Conve	rsion	5. Seasonal Conversion Permit		☐ 0. Engineered Disposal Field (only) ☐ 1. Pre-treatment, specify:		
SIZE OF PROP	ERTY	DISPOSAL SYSTEM TO SER	VE 12. Miscellaneous Components			
3.8+/- X(ACRES [2. Mul		Single Family Dwelling Unit, No. of Bedrooms: _ 3 Multiple Family Dwelling, No. of Units:		TYPE OF WATER SUPPLY		
SHORELAND	ZONING	3. Other:(specify)			X1. Drilled Well (2. Dug Well (3. Private	
Yes	XNo	Current Use Seasonal Year Round	d Windeveloped 4. Public 5. Other			
		DESIGN DETAILS (SY	STEM LAYOUT SH	OWN ON PAGE	∃ 3)	
TREATMENT T	ANK	DISPOSAL FIELD TYPE & SIZ	E GARBAGE DIS	POSAL UNIT		DESIGN FLOW
		1. Stone Bed 2. Stone Trench	1. No 12. Yes	The same of the sa	270	gallone per day
Xa. Regular b. Low Profile		3. Proprietary Device	If Yes or Maybe, specify one below		BAS	gallons per day SED ON:
2. Plastic		a. cluster array c. Linear b. regular load cd. H-20 load	a. multi-compartn			(dwelling unit(s))
CAPACITY: 1000		4. Other: 21 ELJEN IND OR GSFS	b tanks in se			C(other facilities) CALCULATIONS for other facilites
CAPACITT) GAL.	SIZE: 900 xsq. ft. tlin. ft.	Xid. Filter on Tank	supusity		
SOIL DATA & DES	SIGN CLASS	DISPOSAL FIELD SIZING			☐3 Section 4	G (meter readings)
PROFILE CONDIT	ION		1. Not Required	EFFLUENT/EJECTOR PUMP		ATTACH WATER METER DATA
3_/_C	,	1. Medium2.6 sq. ft. / gpd	X2. May Be Required		LATI	TUDE AND LONGITUDE
at_Observation Ho	le #1	x 12. MediumLarge 3.3 sq. f.t / g	pd (3. Required	(3. Required		center of disposal area
Depth18"		3. Large4.1 sq. ft. / gpd	Specify only for engine	Specify only for engineered systems:		_d <u>28 m 18.5</u> s d 18 m 29.0 s
of Most Limiting So	oil Factor	4. Extra Large5.0 sq. ft. / gpd	DOSE:9	DOSE:gallons if g.p.s, sta		e margin of error:
		SITE EVAL	UATOR STATEME	NT		
certify that on _5-1	2 2015	(date) I completed a site evalua	tion on this property ar	nd state that the da	ata reported are	accurate and
The second secon		ompliance with the State of Maine				
- Market	ew M	Cullinal 3		5/22/2015	200	
Site E	valuator Sign	ature	SE#	Date	*	ň
ANDREW MCCULL	OUGH Evaluator Nam	ne Printed T	7-6551 n	nccengr@myfairpoint.ne E-mail A		
			* 1000000 * 100000000000000000000000000			2
Note : Changes to	or deviations	from the design should be confirm	ed with the Site Evalua		E-200 Rev. 08/2	Page 1 of 3 2011

SUBSURFACE WASTEW	Department of Human Services Division of Health Engineering (207) 287-5672 Fax: (207) 287-3165							
Town, City, Plantation	Street,	Road, Subdivision	Owner's Name					
LAMDINE	ASA'S LANE		ROBBINS, BOB					
SITE PLAN	Scale 1"=	ft. or as shown	SITE LOCATION PLAN					
			(map from Maine Atlas recommended)					
			SEE ATTAQUED					
			SEE ATTACHED					
	SEE ATTACHED							
	SEE ATTACHED							
	TION AND CLASSIFICATION							
Observation Hole 1 Depth of Organic 1	」Test Pit Boring Horizon Above Mineral Soil	Observation Hole " Depth of	□ Test Pit □ Boring f Organic Horizon Above Mineral Soil					
Texture Consistency	Color Mottling	Texture 0	Consistency Color Mottling					
LOAMY TRIABLE	NONE _	řE ±						
ches)	STRONG BROVN	(Sg) 10 =	+ + +					
Depth Below Mineral Soil Surface (inches)	YELLOVISH BROWN	Depth Below Mineral Soil Surface (inches) O O O O O O O O O O O O O						
urfac		Surfa	+ + +					
Soil S	LT, DLIVE — COMMON	Soil						
Derail	DISTINCT _	20 E	+ + +					
× Min		» K						
Belov		9 ₄₀	+ + +					
epth		Septib						
	- + -	¹ 50 — ±	+ + -					
Soil Classification Slope Limi Facto	or [] Restrictive Layer	Soil Classification	Slope Limiting [] Ground Water Factor [] Restrictive Layer					
3	[] Bedrock " [] Pit Depth	Profile Condition	% [] Bedrock" [] Pit Depth					
Andrew Whillow 326 5-22-2015 Page 2								
Site Evaluator Signature	SE #	Date	HHE-200 Rev. 8/01					



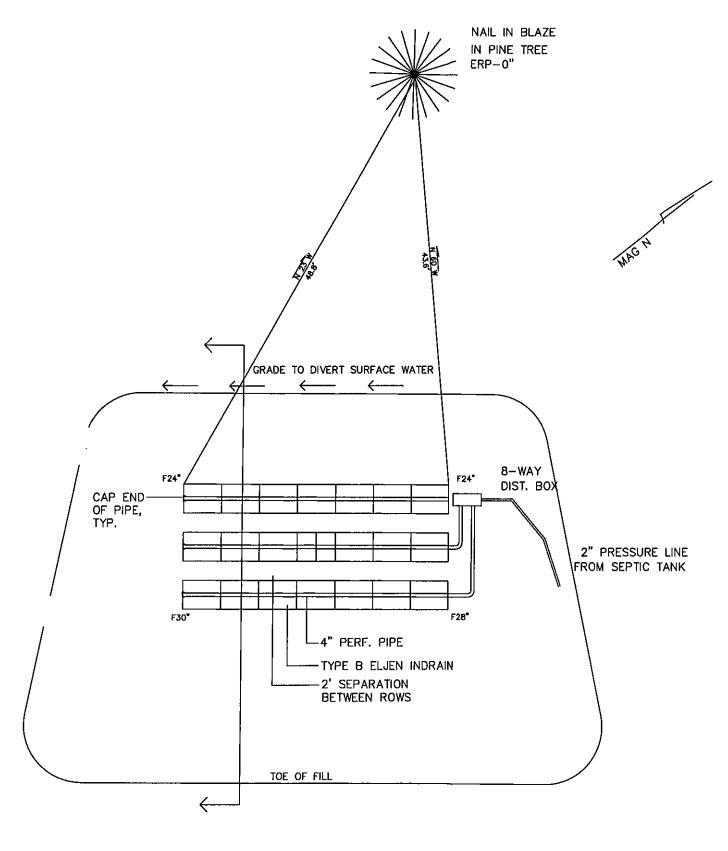


	ASTEWATER DISPOSAL	Division of H	lealth Engineering Fax: (207) 287-3165					
Town, City, Plantation	on	Street, Road, Subdivision	Owner's Name					
LAMDINE	ASA'S LANE		ROBBINS, BOB					
SUB	SURFACE WASTEWATE	R DISPOSAL PLAN						
			SCALE:	1" =FT.				
	SEE	ATTACHED						
	+++++++++++++++++++++++++++++++++++++++							
			! 					
FILL REQUIREMEN	TS CON SEE Finished Grade Elev	NSTRUCTION ELEVATIONS	ELEVATION R Location & Description	EFERENCE POINT on: NAIL IN BLAZE IN				
Depth of Fill (Upslope)	DISPUSAL Top of Distribution	Pipe or Proprietary Device CRUSS- SECTION		PINE TREE-34"				
Depth of Fill (Downslope)	Bottom of Disposal	Area SECTION	Reference Elevation:	ABOVE GROUND				
0 ASSOMED								
	DISPOSAL A	REA CROSS SECTION		lcale +				
	DISPOSAL A	REA CROSS SECTION		Scale				
	DISPOSAL A	REA CROSS SECTION	Horizont	tal 1"=ft.				
	DISPOSAL A	REA CROSS SECTION		tal 1" = ft.				
	DISPOSAL A	REA CROSS SECTION	Horizont	tal 1"=ft.				
	DISPOSAL A	REA CROSS SECTION	Horizont	tal 1"=ft.				
	DISPOSAL A	REA CROSS SECTION	Horizont	tal 1"=ft.				
	DISPOSAL A	REA CROSS SECTION	Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
		ATTACHED	Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
			Horizont	tal 1"=ft.				
	SEE		Horizont	al 1" = ft. 1" = ft.				
Andrew"			Horizont	tal 1"=ft.				

All particles shall pass the 3/4" sieve particle size 0.01" - 0.08" < 5% passing the #200 sieve

DISPOSAL AREA CROSS SECTION

DISPOSAL AREA PLAN



NOTES:
SEPTIC TANK — 8' MIN. FROM HOUSE
DISPOSAL FIELD — 20' MIN. FROM HOUSE
WELL — 100' MIN. FROM SEPTIC TANK AND DISPOSAL FIELD

BOB ROBBINS SCALE 1"=10' JN: 1513 5/22/2015